POSITION	INITIALS	ID-NO.	DATE	
FEE DETERMINATION	Ca		1-11	
O.I.P.E. CLASSIFIER		1.500	12450	
FORMALITY REVIEW	1/2/	71480	2-3-00	
RESPONSE FORMALITY REVIEW	170	11	4-12-00	

INDEX OF CLAIMS

~	Rejected	Ν.	Non-elected
	Allowed	1.	Interference
_	(Through numeral) Canceled	Α.	Appeal
	Restricted	0 .	Objected

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Claim Date	Claim Date	Clāim	Date
Final Original State Sta	Final	Final Original	
	51	101	
3	52 53	102	
3 1	54	104	
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6 7 7 4	56	106	
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9 1 1	59	109	
46 V V V	60 61	110	
11 7 7	62	112	
	63	113	
14	64	114	
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20	70	120	
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26	76	126	
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31	81 82	131	
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48, 49 7	98	148	
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If more than 150 claims or 10 actions staple additional sheet here

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